



Quota Area _____

Lottery Application

Return to:
Montana Department of Revenue
Registration and Licensing
P.O. Box 1712
Helena, MT 59604-1712

MONTANA
LOTAPP
Rev. 8-04

Section 1: Entity/Transaction

Check appropriate boxes:

1. Business Entity

- ☐ Individual
☐ Corporation
☐ Other

If individual, list individual's name _____

If corporation, list corporate name and all stock holders owning 10% or more of the total stock _____

If other:

- If more than one individual, list all individuals' names _____
- If a partnership, list partnership name and all individual partners' names _____
- If LLC or LLP, list LLC/LLP name and all members names _____

2. Transaction

- ☐ New City Beer
☐ New "Floater" All-Beverage
☐ New Restaurant Beer/Wine
☐ New All-Beverage

Section 2: General Information

1. Name of Applicant/Business Entity _____
Address _____
City, State, Zip _____
Contact Person _____ Daytime Contact Phone _____

If applying for a Restaurant Beer/Wine License, answer the following:

- Has your restaurant existed for one year prior to the lottery deadline and have you operated it continuously since then? ☐ Yes ☐ No
If yes, what is the physical address of the premises _____
- If your business is seasonal, has your restaurant existed for one year prior to the lottery deadline and have you operated it continuously during your normal business season since then? ☐ Yes ☐ No
- Have you been an unsuccessful entrant in a previous restaurant beer/wine lottery held by the Department of Revenue? If yes, provide information requested. ☐ Yes ☐ No
Date of lottery _____ City where applied _____ Applicant name _____
- Is there currently a retail license for the sale of beer, wine, or any other alcoholic beverage issued to the above described location? ☐ Yes ☐ No
(If "yes" to this question, you do not qualify for entry into the lottery)
- Has there been a retail license for the sale of beer, wine or any other alcoholic beverages issued to the above described location within the last 12 months? If yes, explain. ☐ Yes ☐ No
License type and/or number _____
Explanation _____

Check the seating capacity for your restaurant ☐ 60 persons or less ☐ 61 to 100 persons ☐ 101 persons or more

Only one (1) lottery application per person will be accepted. "Person" as defined in ARM 42.12.401 means any individual, firm, partnership, limited liability company, corporation or association.

Section 3: Declaration and Affidavit

If my application is drawn in the lottery, I agree to return a completed license application, accompanying documents and the appropriate fees within 30 days of being notified that I was the successful applicant drawn in the lottery. I further understand that all responses concerning ownership on this application must match the license application or I will not be considered.

Signature

Date

Printed Name

Title

Note: If the applicant is a corporation, LLC or LLP the statement on the back must be completed.

Important: You must return only this lottery application by the deadline set in the publication notice. For information or details concerning the deadline for the specific area you are applying for, please contact the department at 444-6900. You will be notified if you are a successful lottery entrant and given 30 days to complete and submit the license application.

Corporate Statement

The stockholders of the corporation are:

Name	Address	Social Security Number	Date of Birth	Number of Shares
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The officers and directors of the corporation are:

Name	Address	Title
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I _____ declare under penalty of false swearing that the information
Name
on this corporate statement is true and complete.

Date _____

Attach additional pages if necessary